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10223 7590 01/27/2006

JENKINS & GILCHRIST, P.C.
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Peter J. Rebuffoni	(Deponent's name)
Pete Releth	(Signature)
May 31, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/851,825	05/09/2001	Sophia A. Carterbury	47079-00092	3932

TITLE OF INVENTION: METHOD AND APPARATUS FOR WRITE PROTECTING A GAMING STORAGE MEDIUM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
provisional	NO	\$1400	\$300	\$1700	04/27/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
NGUYEN, KIM T	3713	463-043000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36).

 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____

2 Schwegman, Lundberg,

3 Woessner & Kluth, P.A.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

WMS Gaming Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Waukegan, IL

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies _____ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-074-3 (enclose an extra copy of this form).

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 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Andrew DeLizioDate 5/31/06Typed or printed name Andrew DeLizioRegistration No. 52,806

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